

**Non-Medical Out-of-Home Care (NMOHC)
Payment Standard
Effective January 1, 2006**

Supplemental Security Income (SSI)	\$603.00
State Supplementary Payment (SSP)	<u>412.00</u>
Total NMOHC Payment Standard	<u>\$1015.00*</u>

The NMOHC Payment Standard includes the following components:

Room and Board	\$435.00
Care and Supervision (maximum)	<u>\$463.00</u>
Amount Payable for Basic Services	\$898.00¹
Personal and Incidental Needs Allowance	<u>\$117.00</u>
(Must be provided to the recipient) (minimum)	<u>\$1015.00</u>

*Amounts are double for SSI/SSP couples.

¹ NOTE: Recipients who have income in addition to their SSI/SSP check (for example, a pension, Social Security retirement, or disability benefits) can be charged the **\$898.00** amount for basic services plus an additional \$20. Because federal rules do not count the first \$20 of a recipient's income against his/her SSI/SSP grant, an SSI/SSP recipient with other income has an extra \$20 that people who receive only an SSI/SSP check do not have. Neither federal nor state law restricts the recipient in how this additional \$20 amount is spent. Thus, if the recipient agrees in the admission agreement to pay the additional \$20 for basic services, the facility may charge the additional amount.

STATE OF CALIFORNIA
DEPARTMENT OF SOCIAL SERVICES
ADMINISTRATION DIVISION

ESTIMATES BRANCH
November 2005

ESTIMATED SSI/SSP PAYMENT STANDARDS
EFFECTIVE JANUARY 1, 2006

Includes no-pass of the CPI COLA and suspension of the CNI COLA ^{3/}

CNI: 4.07% (e)
CPI: 4.10% (a)

	INDEPENDENT LIVING			REDUCED NEEDS			NON-MEDICAL OUT-OF-HOME CARE ^{1/} (NMOHC)					
	RESIDING IN OWN HOUSEHOLD			HOUSEHOLD OF ANOTHER WITH IN-KIND ROOM & BOARD			HOUSEHOLD OF RELATIVE WITH IN-KIND ROOM & BOARD			IN LICENSED FACILITY OR HOUSEHOLD OF RELATIVE WITHOUT IN-KIND ROOM & BOARD		
	TOTAL	SSI	SSP	TOTAL	SSI	SSP	TOTAL	SSI	SSP	TOTAL	SSI	SSP
INDIVIDUAL:												
AGED OR DISABLED - without cooking facilities (RMA) 2/	812.00 896.00 877.00	603.00 603.00 603.00	209.00 293.00 274.00	620.00 N/A 701.00	402.00 N/A 402.00	218.00 N/A 299.00	809.00 N/A 809.00	402.00 N/A 402.00	407.00 N/A 407.00	1,015.00 N/A 1,015.00	603.00 N/A 603.00	412.00 N/A 412.00
BLIND												
DISABLED MINOR - living with parent(s) - living with non-parent relative or non-relative guardian	698.00	603.00	95.00	494.00	402.00	92.00	809.00	402.00	407.00	1,015.00	603.00	412.00
COUPLE:												
AGED OR DISABLED - per couple	1,437.00	904.00	533.00	1,175.00	602.67	572.33	1,648.33	602.67	1,045.66	2,030.00	904.00	1,126.00
- without cooking facilities (RMA) 2/	1,605.00	904.00	701.00	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
BLIND - per couple	1,664.00	904.00	760.00	1,402.00	602.67	799.33	1,648.33	602.67	1,045.66	2,030.00	904.00	1,126.00
BLIND/AGED OR DISABLED - per couple	1,579.00	904.00	675.00	1,316.00	602.67	713.33	1,648.33	602.67	1,045.66	2,030.00	904.00	1,126.00

TITLE XIX MEDICAL FACILITY

	Individual	Couple
Total	\$50	\$100
SSI	30	60
SSP	20	40

1/ NON-MEDICAL OUT-OF-HOME CARE

Personal and Incidental Needs Maximum:	\$206	Minimum:	\$117
Care and Supervision Minimum:	\$374	Maximum:	\$463
Board and Room	\$435		\$435

2/ RMA - Restaurant Meals Allowance - \$84 Individual; \$168 Couple

3/ No-pass excludes the NMOHC, RMA, and Title XIX categories.